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The Professional Organizations, Training and Ethical Codes of Physicians, Dentists, Nurses and Pharmacists

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THE medical profession may be justly so termed because its "prime object is the service it can render to humanity." Its members have attainments in special knowledge and have as a vocation the application of this knowledge for the benefit of others. Reward or financial gain is, as a general rule, a subordinate consideration. Thousands of physicians give largely and nobly of their time and skill to the poor. The most enlightened physicians of today are advancing preventive medicine, which tends to do away with a great deal of medical practice. Those who regularly render a large part of their services to their fellowmen gratuitously and are constantly striving to eradicate their own means of livelihood by preventive medicine are nearing the pinnacle of idealism in their professed object—the service they can render humanity.

THE ORGANIZATIONS OF PHYSICIANS

A most noted characteristic of modern medicine is a coöperation which is rapidly becoming international in extent. Group organization in the profession is widespread, from the small hospital staff conferences through the numerous and various societies of specialists, county societies, and state societies to the national organizations.

The hospital staff conferences are of great value to the staff and consequently to the patients. The various hospital staffs govern their own meetings. Usually, records of many interesting

or puzzling cases are reviewed and thoroughly discussed; treatment, whether operative or non-operative, is analyzed; results are noted. These conferences acquaint the staff with the various activities of the hospital, many of which lie beyond their individual line of medical work, tend to create a close coöperation among the staff members, and often between the staff and the hospital administration, and always stimulate individual endeavor. These staff meetings are required by the rules of hospital standardization promulgated by the American Medical Association and the American College of Surgeons.

THE COUNTY SOCIETY

The county medical societies form the local divisions of the state medical societies; the latter, combined, form the American Medical Association, the national body.

The Philadelphia County Society, as an example, was instituted in 1849 and incorporated under the laws of the state of Pennsylvania, in 1877. Membership is limited to graduates "of an institution legally authorized to confer the degree of doctor of medicine" who must be legally qualified to practise medicine in the state of Pennsylvania and must be citizens of the United States. The names of applicants for membership are read at a stated meeting of the Society, published twice, and then voted upon by a Board of Censors. A member of any other county society affiliated with the American Medical

Association may be transferred to the Philadelphia County Society. The county society is the only portal of entrance to the state and national societies.

The rules of membership provide that "any physician who shall procure, a patent for a remedy or for an instrument of surgery, or who sells or is interested in the sale of patented remedies or nostrums, or shall give a certificate in favor of a patented or proprietary remedy or patented instrument, or who shall enter into agreement to receive pecuniary compensation or patronage for sending prescriptions to any apothecary, shall be disqualified from becoming a member; or if already a member, upon conviction of such offense shall be *ipso facto* deprived of membership."

The general business of the Society is in charge of a Board of Directors. From its membership the following committees are appointed: (a) a Committee of Scientific Program, which has charge of the scientific programs; (b) a Finance Committee, which has supervision of the funds of the Society; (c) a Committee on Medical Defense, which looks after the defense of members in suits for alleged malpractice; (d) a Committee on Publication, which has charge of the publications of the Society; (e) a Committee on Branch Societies, which looks after and reports on the several branch societies.

"Stated meetings of the Society," it is ordered, "shall be (a) business meetings, which shall be held on the third Wednesdays of January, April, June and October, respectively, at 8.30 o'clock p.m.; (b) scientific meetings which shall be held on the second and fourth Wednesdays of each month from September to June, both inclusive, at 8.30 o'clock, p.m."

Branches of the Society may be formed for the transaction of scientific

business. The annual dues of the Society are \$8.

The code of ethics is that of the American Medical Association,¹ violation of which subjects the offending member, upon conviction, to censure, suspension, or expulsion from the Society.

The members of the Society may be disciplined by reprimand suspension or expulsion "for the infraction of any by-law, or for acts or conduct which may be deemed disorderly or injurious to the interests of, or hostile to the objects of the Society, or for acts or conduct which may tend to lower the standard of the medical profession or of the practice of medicine, by a vote of two thirds of the members present at a business or special meeting of the Society."

All moneys of the Society are expended by previous appropriation or by special authorization of the Board of Directors.

The Philadelphia County Medical Society issues *The Weekly Roster* as its official publication.

Every state in the Union has similar county societies all subject to the Principles of Medical Ethics of the American Medical Association, each being a component part of its state society, all having similar objects and aims, the advancement of the practice of medicine and the science of medicine. Application for membership in any of the societies is volitional on the part of the medical profession; non-membership does not carry with it any penalty imposed by the profession other than the stigma of non-membership.

THE STATE MEDICAL SOCIETY

The Medical Society of the State of Pennsylvania, which was organized in 1848 and incorporated under the laws of the state in 1890, may be used as an

¹ For this code see page 260.

example of the organizations found in every state in the country, Alaska, District of Columbia, Hawaii, Isthmian Canal Zone, Philippine Islands and Porto Rico.

The purposes of this Society, as stated in the constitution, "shall be to federate and bring into one compact organization the entire medical profession of the state of Pennsylvania; to unite with similar societies of other states to form the American Medical Association; to extend medical knowledge and advance medical science; to elevate the standard of medical education and to secure the enactment and enforcement of just medical laws; to promote friendly intercourse among physicians; to guard and foster the material interests of its members and to protect them against imposition; and to enlighten and direct public opinion in regard to the great problems of state medicine, so that the profession shall become more useful to the public in the prevention and management of disease and in prolonging and adding to the comfort of life."

Membership in the state society is limited to citizens of the United States who are members in good standing in their county medical societies and physicians who may occupy a teaching position with any college or university in the state.

The legislative power of the Society is vested in the House of Delegates, composed of one delegate from each county society for each hundred members of that society, the presidents of the county societies, the president of the State Society and the trustees. Annual meetings of the Society are held in October of each year at such place as may be determined upon by the House of Delegates.

The funds of the Society are raised by an annual assessment on each member of the several component

county societies, and paid by the county society out of the dues of its members. Out of the funds, each year, a sum not exceeding \$1 for each member is set aside as a special Medical Defense Fund to be used for the legitimate expenses of members threatened with or prosecuted for alleged malpractice. Also, a sum not to exceed \$1 is set aside each year as a Medical Benevolence Fund to be used only for the relief of pecuniary distress of sick or aged members or the parents, widows, widowers or children of deceased members.

It is the duty of the House of Delegates to foster the scientific work and spirit of the Society, to use its influence to secure and enforce all proper medical and public health legislation, to diffuse popular information in relation thereto, and to encourage graduate and research work.

The state is divided into nineteen censorial districts, each having a separate board of censors composed of members of the component county societies, whose duty it is to consider appeals from decisions of county societies by members who have been censured, suspended or expelled. The state is also divided into ten councilor districts, with one councilor for each district. Each councilor is the organizer and peacemaker for his district, visiting the counties in his territory at least once yearly for the purpose of organizing, of studying the condition of the profession, and of improving and increasing the zeal of the county society and the members. The Board of Councilors is the judicial council of the Society. It considers all questions involving the rights and standing of members, all questions of an ethical nature, and decides all questions of discipline affecting conduct of members of component county societies on which an appeal is taken from a board of

censors, with no appeal from its findings. The Board is authorized to employ a member of the bar as legal counsel for the Society.

ACTIVITIES OF STATE MEDICAL SOCIETIES

A great deal of the work of the Society is done by its committees. A Committee on Scientific Work determines the character and scope of the scientific proceedings for each session. The Committee on Public Health Legislation represents the Society in securing and enforcing legislation in the interest of public health and scientific medicine. The Committee on Society Comity and Policy keeps informed concerning matters between the Society and the American Medical Association, between this Society and the county medical societies and between the county societies and their members. The Committee on Health and Public Instruction attempts to bring together the lay people and the profession, increasing the confidence in scientifically trained physicians and uniting the public and the medical profession in a campaign for better health condition. The Committee on Benevolence has absolute and confidential jurisdiction over the distribution of such part of the Medical Benevolence Fund as may be placed in its hands. The Press Committee has general censorship over all matters for the public press in connection with the transactions of the general meetings, the scientific sections and the House of Delegates.

The following special committees of the Pennsylvania State Society carry out the purpose for which they were created, as indicated in their titles:—The Committee on Defense of Medical Research, on Promotion of Efficient Laws on Insanity, on Archives, on Physical Education, on Revision of the Constitution and By-Laws, to In-

vestigate Community Needs for Hospitals, Commission on Conservation of Vision and the Commission on Cancer.

A Board of Trustees has full charge of properties and the financial affairs of the Society. It provides for and superintends the publication of the official organ of the Society, the *Pennsylvania Medical Journal*, published monthly, and of all proceedings, transactions and memoirs of the Society.

An executive secretary organizes the medical profession for efficient action on proposed or pending legislation of interest to the public and the medical profession. He also organizes the machinery for the investigation of illegal practitioners of the healing art in the state.

The Principles of Medical Ethics of the American Medical Association² govern the conduct of members in their relation to each other and to the public.

THE AMERICAN MEDICAL ASSOCIATION

The American Medical Association was organized in 1847, and reorganized in 1901. Headquarters are in Chicago, Illinois.

"The object of this Association," states its constitution, "shall be to federate into one compact organization the medical profession of the United States, for the purpose of fostering the growth and diffusion of medical knowledge, of promoting friendly intercourse among American physicians, of safeguarding the material interests of the medical profession, of elevating the standard of medical education, of securing the enactment and enforcement of medical laws, of enlightening and directing public opinion in regard to the broad problems of state medicine, and of representing to the world the practical accomplishments of scientific medicine, with power to acquire and

² See page 260.

hold property, publish journals, etc.”

Membership is limited to such members of the state societies together with their affiliated local societies, as apply for admission. The application for membership must be accompanied by a certificate of good standing in a county society, signed by the president and secretary of that organization.

The control of the Association rests with a House of Delegates, which consists of one delegate for every 500 members of each permanently organized state or territorial medical society; one delegate from each section of the Association, and one delegate each from the Medical Department of the United States Navy, United States Army, and the United States Marine Hospital Service.

Officers of the Association are elected by the House of Delegates to serve for one year. The president is not eligible for reelection.

An annual session of the Association is held at such time and place as determined by the House of Delegates.

Funds of the Association are raised by an annual assessment on its members of not more than ten dollars, by voluntary contributions for specific objects, and from the profits of its publication. Members may be dropped from the rolls if the dues or assessments remain unpaid for one year. Funds are appropriated by the House of Delegates.

A Board of Trustees of nine members has charge of the publication of all proceedings, transactions and memoirs of the association. It appoints an editor and such assistants as are necessary for these publications, determines salaries, etc.

To expedite and systematically perform its appropriate scientific work, the Association is divided into fifteen sections, each of which is devoted to the encouragement and pursuit of

knowledge in one of the recognized branches into which the science and art of medicine are for convenience divided.

The general management of the Association is under the Board of Trustees. There are five standing committees, and as many special committees or councils as are needed fully to carry out the purposes of the Association.

The Committee of Arrangements has full charge of the annual meetings of the Association. The Judicial Council investigates and reports on all questions of a judicial character, interprets the code of ethics, etc. A Committee on Medical Legislation represents the Association in legislative matters pertaining to public health and scientific medicine. A Committee on Transportation secures special transportation facilities, rates, etc., for the members attending the annual meetings. The Council on Health and Public Instruction has in charge the instruction of the public in regard to infectious diseases and other subjects affecting the health of the community. The Council arranges for public addresses in practically every state in the Union for the instruction of the public. The Council on Medical Education and Hospitals, founded in 1904, exercises influence on medical colleges in relation both to entrance requirements and to the courses given. The work of this Council has been of the greatest benefit to the public in decreasing the number of low grade medical schools and consequently of incompetent and unscrupulous physicians. (*Vide infra.*)

The Council on Pharmacy and Chemistry (a standing committee of the Board of Trustees) investigates proprietary medicines submitted for study by manufacturers, or at the request of members of the Association, and thus puts a decided check on the exploita-

tion of the medical profession by patent medicine makers and the swindling of the people by quacks and quackery. The Council defines "proprietary articles" as any "chemical, drug, or similar preparation used in the treatment of disease, if such article is protected against free competition as to name, product, composition or process of manufacture by secrecy, patent, copyright, or in any other manner." It has adopted certain rules governing the acceptance or rejection of these articles with the "object of protecting the medical profession and the public against fraud, undesirable secrecy and objectionable advertising in connection" with such articles. The acceptable articles are published in a yearly volume, with supplements, entitled *New and Non-official Remedies*. The rejected articles are so reported with other questions of an informative nature from the journal's Bureau of Investigation, from the Council, and from the laboratory of the Association, under the heading "The Propaganda for Reform," which appears weekly in the journal of the Association.

The Council is truly representative of the best thought in the field of medicine, consisting of sixteen members, twelve of whom hold professorial positions in the leading medical colleges of the country, and a staff of clinical consultants of fifteen, thirteen of whom hold similar positions.

The official organ of the Association is its *Journal of the American Medical Association*, founded in 1882. It is published weekly with a circulation of over 80,000 copies. Its original articles are by representative physicians and cover the whole field of medicine. The *Journal* has a Therapeutic Department with practical suggestions for the treatment of the commoner diseases; a Medicolegal Department which summarizes important judicial

decisions which affect the medical profession; a Propaganda Department which exposes the nostrum evil; a department of New and Non-official Remedies (*vide supra*). The *Journal* also contains an epitome of the medical literature of the world, society reports of the greater number of prominent societies of the country, editorials touching all points of medical progress, reports on medical education and state boards of registration, etc.

The Principles of Medical Ethics³ of the American Medical Association, as adopted in 1912, are divided into three main headings: The Duties of Physicians to Their Patients; the Duties of Physicians to Each Other and to the Profession at Large, and the Duties of the Profession to the Public, with several sub-headings under each.

These Principles of the American Medical Association are adopted by all of the component state societies and by the county societies throughout the country and so may be looked on as the national code which regulates to a greater or less extent the professional actions of all members of the medical profession.

Beside the county, state and American Medical Societies, which include in their membership all physicians, there are numerous other local and national medical societies devoted more or less to special branches of medicine. With very few exceptions, these national bodies hold annual meetings, many of them coincidentally in Washington, D. C. In footnote four,⁴ below, is given a list of these national American societies, their names giving an inkling of the branch of medicine to which their deliberations are devoted.

³ See page 260.

⁴ LIST OF NATIONAL MEDICAL SOCIETIES

American: Academy of Medicine, Academy of Ophth. and Oto-Lar., Association of Anatomists, Association of Genito-Urinary Surg's.

ADMISSION TO THE MEDICAL PROFESSION

The standards regulating the admission to the medical profession have been raised very decidedly during the past few years, and the privilege to practise after becoming a member of the profession is being granted under constantly increasing restrictions. The Council on Medical Education and Hospitals, of the American Medical Association, has classified all medical colleges in the country according to standards adopted after years of propaganda, study of the requirements of a thorough medical course, and thorough inspection of the schools. The Council secures data relating to each school which is grouped under four general heads in such a manner that each group is of equal importance. These data concern the faculty, the product, the administration and supervision, and the buildings and equipment, and each group is allowed twenty-five points. Medical schools containing 70 per cent or above of these requirements are classed as A; those between 50 per cent and 70 per cent, as B; and those containing less than 50 per cent, as C.

Under the subject "product" are placed the qualifications of students admitted, the "premedical courses," etc. At the present time six states require a preliminary education of

four years high school before entering the medical schools of that state; four require one year college course; thirty-seven require a two year college course, while the District of Columbia and Wyoming have no fixed standard. Separate medical colleges have requirements higher than those demanded by the state. In 1910, 15.3 per cent of the graduates in medicine had a collegiate degree; in 1921, 46 per cent had a similar degree.

Of the eighty-eight medical colleges rated by the American Medical Association in the United States, seventy are classed as A, eight as B and eight as C, while two are unclassified. Eleven of these medical colleges give only the first two years of the medical course.

In 1906, there were 162 medical schools or colleges in the United States. The marked decrease in the number of medical colleges is the result of the universal demand for higher standards in medical education, and especially in the requirements for admission to medical schools. The old "diploma mill" is a thing of the past.

With the decrease in the number of medical schools there has been a decrease in the number of medical students and graduates. In 1904 there were 28,142 medical students, in 1913, 17,015 and in 1921, 14,872. There were 5,747 graduates in medicine in 1904, 3,679 in 1913 and 3,192 in 1921. Many of the medical schools have limited the

Association of Obst., Gym. & Abd. Surg., Association of Path. and Bacteriologists, Association of Physicians, Association of Railway Surgeons, Child Hygiene Association, Climatological and Clin. Association, Dermatological Association, Electrotherapeutic Association, Gastro-Enterological Association, Gynecological Society, Laryngological Association, Laryn., Rhin. and Otol. Society, Neurological Association, Ophthalmological Society, Orthopedic Association, Otological Society, Pediatric Society, Physiological Society, Proctologic Society, Psychiatric Association, Psychopathological Association, Public Health Association, Roentgen Ray Society, Society of Tropical Medicine, Surgical

Association, Therapeutic Society, Urological Association.

Association of Military Surgeons of the United States, Congress Am. Phys. & Surgs. of N. A., Conference of St. and Prov. Health Auth's, Medical Association of the Southwest, Mississippi Valley Medical Association, Missouri Valley Medical Society of the National Association for Study of Epilepsy, National Association for Study of Pellagra, National Tuberculosis Association, Society of Amer. Bacteriologists, Southern Medical Association, Southern Surgical Association, Western Surgical Association.

number of matriculates in the first year.

The standard medical course in the colleges is four years. Ten medical colleges have adopted the requirement of a fifth year to be spent by the student as an interne in an approved hospital before the degree of M.D. will be granted.

According to published statistics gathered by the American Medical Association there are 353 medical colleges in all countries. In most of the principal countries a four year course is given.

The privilege to practise in any state is regulated by the laws of that state.⁵ These laws differ somewhat, but have the same underlying objects: the protection of the public against the practice of medicine by men not properly qualified. With the exception of Colorado and New Mexico, every state requires that the applicant for registration shall have a diploma and pass an examination. An examination given under federal authority to medical officers of the United States Army, Navy, and Public Health Service is recognized by most state licensing boards. A National Board of Medical Examiners was established in 1915 for the purpose of conducting examinations of physicians that would be so thorough that there would be no doubt of their qualifications to practise medicine. The certificate of this National Board is recognized at the present time by twenty-one states. The National Board requires that applicants shall have had a four year high school course, two years of acceptable college work, a

diploma from a medical school rated in Class A by the American Medical Association, and a year's service as an interne in an acceptable hospital.

The hospital interne year has been adopted as an essential qualification for the license to practise in ten states. The hospital in which the applicant passes his interne year must be approved by the licensing board. The licensing board generally interprets the law as to the necessary qualifications of a hospital to be suitable for the interne year. In Pennsylvania the Bureau of Medical Education and Licensure of the state inspects the various hospitals offering interne service and determines the suitability of each hospital for such service. The hospital standard has been raised very decidedly by the rulings of the Bureau and in many instances the action of the Bureau has been the only influence sufficiently powerful to induce boards of managers fully to equip their hospitals. At the present time there are not enough graduates of medicine to meet the demands of the hospitals of the state for internes.

The licensing boards of most states have the power to refuse registration or to revoke a license "for cause," the causes being specified in most instances. These include immoral, unsafe, unprofessional, or dishonorable conduct; habitual drunkenness; excessive use of narcotics; producing of criminal abortions; fraud or deceit; crimes or misdemeanors; habitual use of morphine, opium, cocaine; habitual intemperance in the use of ardent spirits or stimulants or narcotics; false or fraudulent representations made to obtain practice; the assuming of another's name; failure to recognize dangerous contagious diseases, etc., etc. The withdrawal of the privilege to practise may be for a limited period or may be permanent in that state.

⁵ *The Laws Abstracts and Board Rulings Regulating the Practice of Medicine in the United States and Brief Statements Regarding Medical Registration Abroad* is the title of a special publication (1921) which can be secured from the American Medical Society, 535 N. Dearborn St., Chicago, Ill. Price 60 cents.

Numerous court decisions throughout the United States have upheld these legislative measures to prevent members of the medical profession from preying on society "by the exercise of deceit, malpractice, or gross misconduct in the practise of his profession."

As the licensing boards have felt, "soundness of moral fibre to insure the proper use of medical learning is as essential to the public health as medical learning itself. Mere intellectual power and scientific achievement without uprightness of character may be more harmful than ignorance. Highly trained intelligence combined with disregard of the fundamental virtues is a menace. A physician, however skilful, who is guilty of deceit, malpractice, or gross misconduct in the practice of his profession, even though not amounting to an offense against the criminal laws, well may be thought to be pernicious in relation to the health of the community."

THE DENTAL PROFESSION

The dental profession is composed of members who have special knowledge and attainments which are applied to the benefit of humanity. A large proportion of this profession give of their time and skill to the poor without compensation. Much of their work is prophylactic and their advice, if carried out conscientiously by their patients, would have a decided tendency to reduce the diseases and conditions requiring their attention.

THE SOCIETIES OF THE DENTAL PROFESSION

The dental profession is organized into a National Dental Association formed to promote the art and science of dentistry, to unite the dental profession into one compact body, to safeguard the material interests of the

profession, to elevate the standards and improve the methods of dental education and to enlighten and direct public opinion in relation to oral hygiene, dental prophylaxis, and advanced scientific dental service.

The membership in the national organization consists of the state societies and members of the Army and Navy Dental Corps. The general government of the Association is vested in a House of Delegates which consists of delegates elected by the constituent societies. The House of Delegates elects the officers of the Association and a board of trustees, and transacts all the business of the Association, public, professional, or scientific.

For the purpose of advancing scientific work, the Association is divided into six sections, each caring for a particular branch of dentistry. The Association has organized and maintains a Scientific Foundation and Research Commission, which is charged with the duty of raising funds to carry on exhaustive dental and oral research, to disseminate scientific knowledge, and to organize and incorporate the Research Institute of the Association.

A Board of Trustees elected by the House of Delegates has full charge of the property and of the financial affairs of the association. The Board also has charge of the publication of the *Journal of the National Dental Association*, and of all proceedings, transaction, memoirs, etc. of the association.

The annual dues of the Association are \$2, which also cover the subscription to the *Journal*. Membership is limited to members of the constituent societies.

Annual sessions of the Association are provided for by the Board of Trustees. Much of the general work of the Association is performed by its standing committees.

A Judicial Committee considers all questions, complaints, protests and matters of an ethical nature. Its decisions are subject to appeal to the House of Delegates.

A Committee on Dental Education makes an annual report to the House of Delegates on the existing conditions of dental education in the United States, makes suggestions as to the means and methods by which the National Dental Association may best influence dental education, and acts as the agent of the Association in its efforts to elevate the standards of dental education.

A Committee on Dental Legislation coöperates with the officers of the state and local societies and with the chief officers of the United States Army and Navy in regard to legislation affecting the welfare of dentistry. It makes recommendations to the House of Delegates concerning pending legislation.

A Committee on Transportation arranges special transportation rates to the annual session.

A standing resolution provides that state and constituent societies shall add one dollar to their dues for the support of the Research Institute and that the funds so collected shall be remitted directly to the Research Institute.

The code of ethics adopted by the National Association is adopted by the state and constituent societies, and thus governs the entire dental profession of the country.⁶

The faculties of the various schools of dentistry have organized into a national body known as the National Association of Dental Faculties. The objects of the association are to advance the teachings of dentistry and to make it as uniform as possible throughout the country.

⁶ See page 266.

A similar organization is composed of the state examiners for the registration of dentists. This body is known as the National Association of Dental Examiners, practically every state being represented, with the laws of various states governing their actions as examiners and making such actions official.

A Dental Educational Council of America is composed of five members from each of the three national organizations, the National Dental Association, the National Association of Dental Faculties, and the National Association of Dental Examiners. This Council adopted minimum requirements for Class A Dental Schools in 1916, revisions being made in 1917, 1918, and 1920. The object of the Council in adopting such requirements is to advance the standards of the dental colleges, thereby advancing the product of the school, the dentist.

The requirements of the Council consider the administrative policy of the college, the minimum entrance requirements, the faculty and teaching staff, the equipment and teaching facilities, the course of study and curriculum, the rules of attendance, promotion and gradation, and the state board record of each school, and outline fully the minimum in each case required to place the college in Class A. A Class B college does not meet all of the requirements of the Council for designation as A, but is making full utilization of its facilities and will be able to meet the higher requirements in a reasonable time. A Class C college, in the opinion of the Council, cannot meet the requirements of the Council without extensive improvements and complete reorganization.

There were nineteen Class A, twenty-four Class B and four Class C colleges listed by the Council in 1921. Graduates of Class C are not accepted for

registration in any of the states of the Union. Class A and Class B graduates are eligible for registration in all states.

DENTAL ASSOCIATIONS

The state dental associations form the constituent societies of the national organization. Practically every state and territory in the union has such an organization. That of Pennsylvania will serve as a sample of the others.

The Pennsylvania State Dental Society was incorporated in 1869, the object being "to advance the science of dentistry, and thereby to lessen human misery by investigating the diseases incident and remedies applicable to the human mouth and its dependencies; by observing and recording the changes produced in dental maladies by the progress of the arts, population, manners and customs, temperament, age and sex; by searching for and applying the various remedial agents to be found in the several kingdoms of nature, by enlarging the avenues of knowledge from observations, discoveries and inventions, both at home and abroad, and by cultivating uniformity and order in dental practice."

Membership in the Pennsylvania State Society is limited to the members of the component societies. The dues are \$2 per annum, payable to the component society of which the payee is a member, which society forwards the dues to the secretary of the State Society. Meetings of the Society are held annually.

The council of the Society has full control of its business, appoints all delegates and standing committees, selects the place for the annual meeting, nominates two persons for each vacancy to be filled in the officers of the Society and four persons for each vacancy in the State Board of Dental

Examiners, two of whom are nominated by the Society to the Governor for appointment on the Board.

The standing committees are the Program, Clinic, Publication, on Ethics, on Dental Science and Literature, on Necrology and on Arrangement, whose duties are outlined by the titles.

The Committee on Ethics aids in maintaining the ethical standard of the Society. The code of ethics is that of the National Dental Association.⁷

The local dental societies which form the component societies of the state society are not necessarily county societies. Some of these local societies, such as the New York Society of Orthodontists, are composed of members of the dental profession especially interested in some particular branch of dentistry. Others, like the Pennsylvania Association of Dental Surgeons, or the Academy of Stomatology, include all members of the profession. Similar organizations are found throughout the Union, all component societies of their state organizations and all subject to the Code of Ethics of the National Dental Association.

The Pennsylvania Association of Dental Surgeons was organized in 1845 by dental surgeons of the city of Philadelphia who were "imbued with a love of our science, and desirous of improving and elevating it, and promoting the honor, character and interests of the dental profession."

Meetings are held monthly, except during July, August and September. Applicants for membership must be twenty-one years of age, of good moral character, and legal practitioners of dentistry. Any member may be impeached for contravening the laws of the society, for malpractice or other

⁷ See page 266.

misconduct. If a committee appointed for the purpose of considering the impeachment, after a fair trial, sustains the impeachment, the society may expel the member by a two-thirds vote.

The Academy of Stomatology was organized in 1894, the objects of the society being "the education and mutual improvement of its members in all matters pertaining to the study of the oral cavity by the presentation and discussion of papers; the collection of literature, specimens and models, and the study thereof; and the fostering of all efforts which tend to the advancement and elevation of dentistry as a profession."

A council is the governing body of the society. It elects all officers, has charge of all questions of finance, maintenance or betterment of the organization.

Membership in the society is limited to the organizers, not to exceed fifty, and such other members as may be elected by the Council after the names of applicants have been presented to all members for consideration and protest or approval to the council. The constitution of the Academy provides for the establishment and maintenance of a library and a museum for the collection and preservation of specimens, models, appliances, etc., pertaining to oral science, art and practice.

Meetings are held monthly, except during July, August and September. The annual dues are \$10, of which sum \$2 for each active member is forwarded to the Secretary of the Pennsylvania State Dental Society.

The Academy of Stomatology accepts as the standard for the guidance of its members the code of ethics adopted and set forth by the National Dental Association.⁸

ADMISSION TO THE DENTAL PROFESSION

The practice of dentistry is regulated by the laws of the various states. Practically every state in the Union has passed laws for this purpose. These laws provide for the registration of dentists, the qualifications for registration, methods of examining, licensing, revoking of licenses, penalties for practising without a license, etc. The state law of Pennsylvania may be taken as an example of these laws.

In Pennsylvania, the Act of May 5, 1921, provides that a Dental Council, composed of the Secretary of Internal Affairs, the Commissioner of Health, the Superintendent of Public Instruction, the President and First Vice-President of the Pennsylvania State Dental Society and the Secretary of the Board of Dental Examiners, shall supervise and provide rules for the examination of all applicants for license to practice dentistry in the commonwealth, shall have the sole power to grant licenses to practice dentistry in the commonwealth, and shall have sole power to revoke licenses to practice dentistry "if the accused shall have been guilty of malpractice or convicted of a felony or of violating the dental laws of this commonwealth or shall be addicted to the use of narcotic drugs: provided, that any person whose license shall have been revoked shall have the right of appeal to a court of competent jurisdiction."

Applicants for registration must be twenty-one years of age, of good moral character, of competent education, and must have a dental degree conferred by a reputable educational institution approved by the Dental Council. The fee for registration is \$25. The applicant is examined by a Board of Dental Examiners in certain specified subjects, with practical

⁸ See page 266.

demonstration of their ability to perform dental work. License is granted by the Dental Council, and must be registered. All members of the dental profession must register once yearly, paying a fee of one dollar, which fees are to be used by the Board of Dental Examiners for the purpose of carrying into effect provisions of the Act against unlicensed and unregistered practitioners.

The law also provides for penalties to be imposed on those who practise without a license.

THE NURSING PROFESSION

Closely allied to the medical profession, in fact its right hand, is the nursing profession. Specially trained to care for the sick and injured, the members of this profession devote their time, energy and skill in aiding the medical profession to alleviate the sufferings of others, aiding it to prevent disease and aiding it in promulgating health measures. Its prime object is the service it can render humanity.

ORGANIZATIONS OF THE NURSING PROFESSION

The organizations of the nursing profession comprise local, state and national associations. The local organizations consist of the alumnae associations of the various training schools for nurses, usually connected with hospitals, in various sections of the country. These alumnae associations consist of graduates of their individual schools, "working together for a common good as comrades and companions to maintain the ideals of education, of harmony and of organization" of the nursing profession. Each group forms its own government, qualification for membership, etc. Meetings are held regularly, both for scientific advancement and for social intercourse.

Practically every state in the Union has a state organization, that of Pennsylvania being a good example of the form of organization maintained. In Pennsylvania the official organization is known as the Graduate Nurses' Association of the State of Pennsylvania. For the better furtherance of the purposes for which the Association was formed, the state is divided into districts, each district comprising several counties. Membership is limited to registered nurses who are members in good standing of their alumnae association.

The general supervision of the affairs of the Association rests with the Board of Directors which is composed of the officers, chairman of the Committee on Eligibility, and four directors. The Board arranges for the annual, or semi-annual meetings of the Association, prepares the program of papers, and attends to the general business of the Association. An Advisory Council, consisting of the officers of the Association, the presidents of the district associations, the chairmen of sections, the president of the State League of Nursing Education, and the president of the State Organization for Public Health Nursing, considers and promotes the general interests of the Association.

The voting body of the sessions of the Association consists of the regularly accredited delegates from the district associations, each district being entitled to one delegate for every twenty-five members.

"Any member whose moral or professional conduct may reflect upon the Association may be dropped from membership by the Board of Directors" after thorough investigation, the accused having the privilege to offer a defense.

The official organ of the Association is that of the national body, the *American Journal of Nursing*.

The national body of the nursing profession is known as the American Nurses' Association, incorporated in 1901 under the laws of New York State, and in 1917 under the code of laws of the District of Columbia.

The purposes of the corporation "are to promote the professional and educational advancement of nurses in every proper way; to elevate the standard of nursing education; to establish and maintain a code of ethics among nurses; to distribute relief among such nurses as may become ill, disabled or destitute; to disseminate information on the subject of nursing by publications; to bring into communication with each other various nurses and associations and federations of nurses throughout the United States of America."

Membership is limited to members in good standing in the state associations belonging to the national association.

The general business of the association is vested in a Board of Directors. An Advisory Council to consider and promote the interest of the Association is composed of the officers of the Association, the presidents of state organizations, members of the Association, the chairmen of sections, and the editor of the *American Journal of Nursing*.

The general work of the Association is carried on by eight standing committees. A biennial convention of the Association is held. Dues are paid by the component societies, fifteen cents for each active member of each society.

There are forty-eight state members of the national body. The official organ, as has been said, is the *American Journal of Nursing*, published monthly. This is also the official organ of thirty-five state and other nursing organizations.

The National League of Nursing Education was formed in 1893 for the

purpose of joining all directresses of training schools into an organization for the betterment of the instruction given to nurses. It has broadened out since then to include all members of the nursing profession who are engaged in educational work. These include superintendents and assistant superintendents of schools of nursing and hospitals, instructors, supervisors in schools of nursing and head nurses, members of state boards of nurse examiners and head workers in various forms of social, educational and preventive nursing. Many of the states have similar organizations, all of them being component societies of the national association.

Another important national organization is the National Organization for Public Health Nursing, which includes in its membership both lay and professional members. As its name implies, its activities are principally concerned with public health nursing.

In order to combine all types of nursing activities in one body, headquarters of the national nursing associations were established in New York. This organization was originally supported by the Red Cross, but at present is sustained entirely by the various national associations of nurses. One of its most important functions is to act as a placement bureau where applicants for positions in various administrative or teaching positions register; and where one may apply for assistance in obtaining such administrative or teaching nursing forces as are required.

ADMISSION TO THE NURSING PROFESSION

The standards of the profession have been gradually raised through years of constant endeavor on the part of the nursing associations. Educational and training facilities of the various hospi-

tals with which training schools are connected have been thoroughly studied, and a standard set. There are in the country some 1,600 training schools for nurses, of which number 175 are to be found in Pennsylvania.

The education of the nurse for her professional work is obtained in training schools, practically all of which are connected with hospitals. To improve the standard of nursing and of the profession, every state in the union has passed laws providing for the registration of nurses which give the privilege of using the title "registered nurse," or the letters R.N. after her name. The registering of nurses is delegated to a board created for that purpose, the boards in most states having the power to determine the qualifications of the training school from which an eligible applicant for examination for registration may graduate.

The Pennsylvania state law may be taken as an example of the others. This law creates a State Board of Examiners for the registration of nurses, to be composed of three registered nurses and two physicians. The Board elects its own officers, among them a secretary who is required to keep a register of all nurses and attendants licensed under the law, and to file with the State Commissioner of Health an exact counterpart of all certificates issued.

The Board submits annually to the State Board of Charities a report of its findings or investigations pertaining to the training schools in the several hospitals throughout the state. The Board has no power to fix prices or in any way control the compensation received by the registered nurse. The Board prepares a report for public distribution of all training schools approved by the Board as possessing the necessary requirements for giving

a pupil nurse a full and adequate course of instruction. All expenses of the Board are taken out of registration fees.

A member of the Board is elected as an Educational Director, whose duty it is to assist in maintaining the necessary standards in living, working, and educational conditions of the various training schools.

The law provides that every applicant, to be eligible for examination for registration, must furnish evidence satisfactory to the Board that he or she is twenty-one years of age, is of good moral character, and has graduated from a training school for nurses which gives at least a two years' course of instruction. Those receiving a certificate of registration may call themselves registered nurses and use the letters R.N. All states provide penalties ranging from fines to imprisonment as punishment for those illegally using the title.

The Pennsylvania law also provides for the registering of licensed attendants, after examination. Such applicants must be eighteen years of age, of good moral character, must have completed a course prescribed by the Board in some institution not having a training school for nurses. The licensed attendants are permitted to use the letters L.A. after their names. In every state the law provides that the act shall not be construed so as to affect in any way the right of any person to nurse gratuitously or for hire.

Registration of any nurse or attendant may be revoked by the Board of Examiners in any state for "sufficient cause," these causes varying in the states and including gross incompetence, dishonesty, habitual intemperance, immorality, unprofessional conduct, conviction of felony, any act derogatory to the morals or standing of

the profession, conviction of a crime or immoral conduct, inebriety, drug habit, habitual intemperance, drunkenness, neglect of patient, certificate obtained by fraud,⁹ etc.

The Board of Examiners determines the eligibility of graduates of training schools, and outlines the standards of the schools. In Pennsylvania, the Board also outlines the minimum number of hours of instruction and the curriculum which must be followed. This curriculum calls for 484 hours of theoretical instruction, extending over three years, the various subjects and hours allotted to each being fully outlined.

Applicants for admission to the schools must have had one year high school education, or its equivalent, must present a certificate of good health and good morals, and must be between the ages of eighteen and thirty-five.

THE PHARMACISTS

The pharmaceutical profession is one "which demands knowledge, skill and integrity on the part of those engaged in it, being associated with the medical profession in the responsible duties of preserving the public health and dispensing the useful though often dangerous agents adapted to the cure of disease."

PHARMACEUTICAL ASSOCIATIONS

The American Pharmaceutical Association was organized in 1852 for the purpose of uniting the pharmacists of America in a body which should improve and regulate the drug market, encourage proper relations among druggists, pharmacists, physicians and the people, improve the science and art

of pharmacy, suppress empiricism, uphold standards of authority in education, theory and practice of pharmacy, create and maintain a standard of professional honesty, etc., etc.

Membership consists of pharmacists and druggists of good moral and professional standing, teachers of pharmacy, chemistry and botany, editors and publishers of pharmaceutical journals, who are endorsed by two members of the association and then elected by majority vote of the council of the association. All members subscribe to the "Code of Ethics" adopted by the Association at the time of its organization.¹⁰

The annual dues are \$4; the price of the official organ, the *Journal of the American Pharmaceutical Association*, is \$4. A reduction of \$3 is made when both dues and subscription to the *Journal* are paid at one time, in advance.

The business of the association is vested in a council which consists of the officers, *ex-officio*, one member from each local branch of the association and nine other members selected from members who have had at least three years membership in the association.

A Reporter on the Progress of Pharmacy is appointed annually for the purpose of preparing a comprehensive report on the improvements and discoveries in pharmacy, chemistry, and materia medica and of preparing an index or brief abstract of current pharmaceutical and chemical literature for publication in the journal of the association.

The council elects the officers of the association: has charge of the revision of the roll of members, the editing, publication and distribution of all publications of the association. It elects two standing committees of the

⁹ For the Code of Ethics of the Graduate Nurses' Association of the State of Pennsylvania see page 265.

¹⁰ For this code see page 267.

council, one on Publication and one on Finance. The council publishes the official organ of the association, its journal. It also appoints a committee of fifteen, from the members of the association, which has charge of the revision of the *National Formulary* which contains definite formulas for preparations frequently used in medical practice, for which formulas are not contained in the *United States Pharmacopoeia*. It is the standard governing the members of the association.

Meetings of the association are held annually. To expedite and render more efficient the work of the association, sections are provided on Commercial Interests, on Practical Pharmacy and Dispensing, on Pharmaceutical Legislation and Education, on Historical Pharmacy, with a Women's Section and a Scientific Section with subdivisions on Chemistry, Botany, Biologic Assays, and Bacteriology. Various standing committees are appointed or elected, such as that on United States Pharmacopoeia, on Transportation, on Research, on Pharmaceutical Syllabus, etc.

Local branches of the association are formed in the various states, all members of the local branch being members of the national association.

Each state in the union has its pharmaceutical association. The United States is also divided into districts, each consisting of several states, and each having its separate organization.

Other national associations connected with the profession of pharmacy are as follows:

The National Association of Retail Druggists, with component societies consisting of local associations of retail druggists.

The National Association of Boards of Pharmacy. The state boards of pharmacy have in charge the examination of applicants for registration as pharmacists, making the requirements for eligibility, etc.

The American Conference of Pharmaceutical Faculties, which prepares a list of the schools or colleges of pharmacy of recognized merit. Efforts are being made to raise the general standard of all colleges by increasing the educational requirements for admission. Graduation from a recognized college of pharmacy is a prerequisite to examination for registration as a pharmacist in all states.

The American Drug Manufacturers' Association.

All of these national organizations hold annual meetings.